No

U.S. DEPT. OF COMM. - Econ. And Stat. Admin. - U.S. CENSUS BUREAU FORM SF-SAC ACTING AS COLLECTING AGENT FOR (3-20-2001) OFFICE OF MANAGEMENT AND BUDGET Data Collection Form for Reporting on AUDITS OF STATES, LOCAL GOVERNMENTS, AND NON-PROFIT ORGANIZATIONS For Fiscal Year Ending Dates on or After January 1, 2001 **RETURN TO** Complete this form, as required by OMB Circular A-133, Federal Audit Clearinghouse "Audits of States, Local Governments, and Non-Profit 1201 E. 10th Street Organizations." Jeffersonville, IN 47132 GENERAL INFORMATION (To be completed by Auditee, except for Item 7) 1. Fiscal period ending date for this submission 2. Type of Circular A-133 Audit / <u>yy</u> mm / dd Fiscal Period End Dates Must Be Program-specific audit On or After January 1, 2001 Single audit 06 3. Audit Period Covered FEDERAL 4. Date Received by Federal clearinghouse **GOVERNMENT Months** Annual Other: X **USE ONLY** Biennial 5. Employer Identification Number (EIN) b. Are multiple EINs covered in this report? Yes X If Part I, Item 5b = "Yes", complete Part I, Item 5c 8 0 0 0 6 (Complete the continuation sheet on Page 4) a. Auditee EIN 7. AUDITOR INFORMATION (To be completed by auditor) 6. AUDITEE INFORMATION a. Auditee name a. Auditor name Office of the State Auditor Marshall County School District b. Auditor address (Number and street) b. Auditee address (Number and street) 501 North West Street, Suite 801 158 East College Avenue City Jackson **Holly Springs** Zip+4 Code Zip+4 Code State State 39201 38635 MS MS c. Auditee Contact c. Auditor Contact Name Name Rodney D. Zeagler Mr. Don Randolph Title Director, Financial & Compliance Audit Superintendent of Education

d. Auditee contact telephone

662

) 252

) 252

Auditee contact FAX (Optional)

f. Auditee contact E-mail (Optional)

- 4271

- 5129

d. Auditor contact telephone

576

576

Auditor contact FAX (Optional)

Auditor contact E-mail (Optional)

www.osa.state.ms.us

- 2672

- 2687

601

AUDITEE CERTIFICATION STATEMENT - This is to certify that, to the best of my knowledge and belief, the auditee has: (1) engaged an auditor to perform an audit in accordance with the provisions of OMB Circular A-133 for the period described in Part I, Items 1 and 3; (2) the auditor has completed such audit and presented a signed audit report which states that the audit was conducted in accordance with the provisions of the Circular; and, (3) the information included in **Parts I, II,** and **III** of this data collection form is accurate and complete. I declare that the foregoing is true and correct.

Signature of certifying official

Date

Month / Day / Year

Printed Name/Title of certifying official

Mr. Don Randolph, Superintendent of Education

AUDITOR STATEMENT - The data elements and information included in this form are limited to those prescribed by OMB Circular A-133. The information included in Parts II and III of the form, except for Part III, Items 8, 9, and 10, was transferred from the auditor's report(s) for the period described in Part I, Items 1 and 3, and is not a substitute for such reports. The auditor has not performed any auditing procedures since the date of the auditor's report(s). A copy of the reporting package required by OMB Circular A-133, which includes the complete auditor's report(s), is available in its entirety from the auditee at the address provided in Part I of this form. As required by OMB Circular A-133, the information In Parts II and III of the form was entered in this form by the auditor based on information included in the reporting package. The auditor has not performed any additional auditing procedures in connection with the completion of this form.

Signature of auditor

Date

Month / Day / Yes

Rodney D. Zeagler

12 / 23 / 09

										EI	N: 64	4600	068	10
	Part	I GENERAL IN	IFORMAT:	ION - Continue	ed									
8.	Did th	ne auditee expend mo	re than \$2!	5,000,000 in Fed	leral award	s du	ing the	fiscal year	r? <i>(I</i>	Mark	(X) on	e box	r)	
1		Yes - Identify Cogni	zant Agen	cy in Part I, Ite	em 9		2 X	No - <i>Skip</i>	to	Par	t II, It	em 1	<u>.</u>	
		ate which Federal aw							ndir	ng in	fiscal	yeaı	20	00.
	(Mark	(X) one box) Howeve	er, if cogniz	ance has been re	eassigned,	see i				1				
02	;	Agency for International Development	al ₈₁	Energy	14		Urban	ng and opment		47		ationa ounda		∍nce
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	Part I		CTATEME	NTS (To be co										
1.		e of audit report? (Ma			mpietea b	y au	aitor)							
	יקעי]				Г		A	!!			المنصاء			! !
2.	Ic a	Unqualified opini "going concern" expla		x Qualified opi				e opinion	4		Disclai Yes		Х	No
3.		reportable condition		agraph included	in the audi	ıtıch	OIL	If No,Skip	1	Х		2	_	
4.		ny reportable condition		as a material we	naknoss2			to Item 5	1		Yes =	2		No No
5.		material noncompliar	<u> </u>		akilessi	<u> </u>			1	X	Yes	2	Х	No
				25. 46 1					1		165	2	^	NO
	art I			(To be comple	eted by au	aito	<u></u>							
1.	Type	of audit report on ma x Unqualified opini	· · -	Qualified opi	inion [Advorc	e opinion			Dicela	imar	of o	pinion
2.	Doe	s the auditor's report				<u>i</u>		•	4	L	Discia	iiiiici	01 0	pinion
-	inclu	ude departments, age	ncies or oth	ner organizationa	al units exp	endi	ng grea	ater than						
		0,000 in Federal awar nis audit? (AICPA SOP 9			3 audits wi	hich .	are not	included	1		Yes	2	x	No
3.		at is the dollar thresho	<u> </u>		d Tyne B ni	roara	ms? (8	520(b))		\$				300000
4.		the auditee qualify as				09.0	(5		1	Ť	Yes	2	Х	No
5.	Is a	reportable condition	disclosed fo	or any major pro	gram? (§	.510	(a)(1))	If No,Skip to Item 7	1	Х	Yes	2		No
6.	Is a	ny reportable conditio	n reported	as a material we	eakness? (§	5	10(a)(1		1		Yes	2	Х	No
7.	Are	any known questione	d costs rep	orted? (§510(a	a)(3)or (4))				1		Yes	2	Х	No
8.	Was	a summary Schedule	e of Prior Au	udit Findings pre	pared? (§	315	(b))		1	Х	Yes	2		No
9.		icate which Federal a wn in the Summary S												
02		Agency for Int'l	83 Fe	deral Emergency	43		lational A	Aeronautics &	•	96 [so	ocial Se	ecurit	y
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11		Commerce		ousing and Urban evelopment		\neg	or the Ar			82		nited S		s Agency
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12		Defense	M ₁	useum Services	47		National S			00		one		_
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81 66		Environmental	17 La	abor	· · ·	_ [Orug Con	trol Policy						
	Faci	Protection Agency named agency identified is rec		egal Services Corp	reporting pa			siness Admin						
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:		• the Federal Audit Clea										\boxtimes		
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1	Cou	nt total number of boxes	s marked abo	ove and submit thi	s number of	repo	rung pa	ickayes	• • •			1		

Pa	rt III FEDERAL	PROGRAMS - C	ontinued											
10. FEDERAL AWARDS EXPENDED DURING FISCAL YEAR 11. AUDIT FINDINGS														
CFDA Number (a)		Research and Develop-	Name of Federal Program	Amount expended			Direct award				or am	Types of compliance requirement(s) ³	Audit finding reference number(s)⁴	
Agency Prefix ¹	Extension ²	ment (b)	(c)	(d)			(e)		(f))	(a)	(b)	
10 .	550	1 Yes 2 X No	Food donation	99761	.00	1 2		Yes No	1		Yes No	0.	N/A	
10 .	553	1 Yes	School breakfast program	445731	.00	1		Yes No	1	X	Yes No	В.	03-4.	
10 .	555	1 Yes 2 X No	National school lunch program	706642	.00	1 2		Yes No	1	×	Yes No	В.	03-4.	
84	010	1 Yes X No	Title I grants to local education agencies	1128686	.00	1 2		Yes No	2	x	Yes No	О.	N/A	
84 .	196	1 Yes X No	Education for homeless children and youth	233	.00	1 2	••••	Yes No	1		Yes No	О.	N/A	
84 .	186	1 Yes No	Safe and drug Free schools state grants	51323	.00	1		Yes No	1		Yes No	0.	N/A	
84 .	340	1 Yes 2 X No	Class Size Reduction	4926	.00	1 2		Yes No	1 2	 X	Yes No	0.	N/A	
84 .	348	1 Yes	Title I accountability grants	60967	.00	1 2		Yes No	1		Yes No	0.	N/A	
84 .	358	1 Yes	Rural education	24992	.00	1 2		Yes No	1		Yes No	0.	N/A	
84 .	332	1 Yes 2 X No	Comprehensive school reform demonstration	60192	.00	1 2		Yes No	1		Yes No	0.	N/A	
TOTAL FEDERAL AWARDS EXPENDED .00 IF ADDITIONAL LINES ARE NEEDED, PLEASE USE THE EXTRA PAGE 3 FILL ATTACH ADDITIONAL PAGES TO THE FORM, AND SEE INSTRUCTIONS.											HE EXTRA PAGE 3 FILE, SEE INSTRUCTIONS.			

¹See Appendix 1 of instructions for valid Federal Agency two-digit prefixes.

²Or other identifying number when the Catalog of Federal Domestic Assistance (CFDA) number is not available. (See Instructions)

³Enter the letter(s) of all type(s) of compliance requirement(s) that apply to audit findings (i.e., noncompliance, reportable conditions (including material weaknesses), questioned costs, fraud, and other items reported under §____.510(a)) reported for each Federal program.

EIN:

646000680

Part III FEDERAL PROGRAMS - Continued																
10, FED	ERAL AWARDS EXPENDE	SCAL YEAR									11. AUDIT FINDINGS					
CFDA Number (a) Federal		Research and Develop-		arch d	Name of Federal Program	Amount expended			Direct award			Maj rogi	or ram	Types of compliance requirement(s) ³	Audit finding reference number(s)⁴	
Agency Prefix ¹	Extension ²	ment (b)			(c)	(d)		(e		e)	(f))	(a)	(b)	
84 .	298	1 2	X	Yes No	Innovative education program strategies	20586	.00	1 2	×	Yes No	1 2	Х	Yes No	0.	N/A	
84 .	048	1		Yes No	Vocational education - basic grants to states	56590	.00	2	X	Yes No	1	X	Yes No	О.	N/A	
84 .	367	1 2	x	Yes No	Improving teacher quality - state grants	108735	.00	1 2	x	Yes No	2	х	Yes No	О.	N/A	
84	318	2	x	Yes No	Education technology state grants	14498	.00	2	 X	Yes No	2	x	Yes No	0.	N/A	
84 .	027	1 2	×	Yes No	Special education - grants to states	379462	.00	1	 Х	Yes No	1 2	 Х	Yes No	0.	N/A	
84 .	173	1 2	x	Yes No	Special education - preschool grants	26617	.00	1 2	x	Yes No	2	x	Yes No	О.	N/A	
		1 2		Yes No			.00	1 2		Yes No	1 2		Yes No			
•		1 2		Yes No			.00	1 2		Yes No	1		Yes No			
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		1 2		Yes No			.00	1 2		Yes No	1		Yes No			
		TO	ΓAL	FEDI	RAL AWARDS EXPENDED	3189941	.00	-						DED, PLEASE USE TH TO THE FORM, AND S	E EXTRA PAGE 3 FILE, SEE INSTRUCTIONS.	
¹ See Ap	¹ See Appendix 1 of instructions for valid Federal Agency two-digit prefixes.															

- Activities allowed or unallowed Allowable
- B. costs/cost principles
- Cash management
- D. Davis - Bacon Act
- E. Eligibility

⁴N/A for None

- F. Equipment and real property management
- G. Matching, level of effort, earmarking
- H. Period of availability of Federal funds
- Procurement and suspension and debarment I.
- Program Income

- Real property acquisition and relocation assistance
- Reporting
- Subrecipient monitoring
- Special tests and provisions

None Other P.

²Or other identifying number when the Catalog of Federal Domestic Assistance (CFDA) number is not available. (See Instructions)

³Enter the letter(s) of all type(s) of compliance requirement(s) that apply to audit findings (i.e., noncompliance, reportable conditions (including material weaknesses), questioned costs, fraud, and other items reported under § ___.510(a)) reported for each Federal program.